Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR



1074	100
1019	7/0/

Name of Offering

UNIFORM LIMITED OFFERING EXEMPTION

Prefix	Serial
DATE RECEIVE	ED

	this is an amendment and name has changed, as the January 10, 2008	nd indicate change.)
	apply): Rule 504 Rule 505 Rule	: 506
ype of Filing: Rew Filing	¥ 4	
	A. BASIC IDENTIFICATION D	RECDSEC.
Enter the information requeste		
	is is an amendment and name has changed, and	indicate change.) JAN 1 2 2005
FastShip. Inc.		
ddress of Executive Offices	(Number and Street, City, State, Zip Co	
	Suite 2720 Philadelphia, PA 19103	1 (210) 3/4-1//0
ddress of Principal Business Of different from Executive Office 1	perations (Number and Street, City, State, Zip Coces)	· ·
rief Description of Business	,	
Commercial cargo vesse	el design and operation.	JAN 1 4 2055 (
ype of Business Organization		FINARCIAL
C corporation	☐ limited partnership, already formed	Other (please specify):
D business trust	☐ limited partnership, to be formed	The second of th
Actual or Estimated Date of Inc	Month Year	☐ Actual ☐ Estimated ice abbreviation for State:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMDR control number.

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 Each executive officer and director of corporate issuers and of corporate general and Each general and managing partner of partnership issuers. 	managing par me	s of partnership issuers:
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☑ Director	General and/or Managing Partner
full Name (Last name first, if individual)		
Pederson, Einar		
Business or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103	•	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☑ Director	☐ General and/or Managing Partner
full Name (Last name first, if individual)		
Bullard II, Roland K.	·	
Susiness or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103		^
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Chambers, Kathryn Riepe		
Business or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103		
Theck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☑ Director	☐ General and/or Managing Partner
full Name (Last name first, if individual) Giles, David L.	•	
Business or Residence Address (Number and Street, City, State, Zip Codé) 1700 Market Street, Suite 2720 Philadelphia, PA 19103		
Theck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Colgan, Dennis		
Business or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103		•
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Riverfront Development Corporation Business or Residence Address (Number and Street, City, State, Zip Code) 701 North Broadway, Glouchester City, NJ 08030		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	T Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Dunn, David E.	•	
Business or Residence Address (Number and Street, City, State, Zip Code)		
· · · · · · · · · · · · · · · · · · ·		•

A. BASIC IDENTIFICATION DATA

• Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

I. Has t	the issuer s	old, or do	es the issu	er intend t	o sell, to i	ion-accred	ited invest	ors in this	offering?	*******	• • • • • • • •	
	•		1	wer also is		•						
2. What	is the mir	imum inv	estment th	at will be	accepted fi	rom any ir	dividual?	• • • • • • • • •	• • • • • • • •		•••••	\$10,000
•		•		•								Y
				rship of a							,	
sion o to be list th	or similar fo listed is ar ne name of	emuneration associated the broke	on for solici d person of r or dealer	ach person itation of p r agent of . If more to ormation i	ourchasers : a broker o than five (:	in connecti r dealer re 5) persons	ion with sal gistered wi to be listed	es of secur th the SEC I are assoc	ities in the cand/or w	offering. 1 ith a state	f a person	l
Full Name	(Last nam	e first, if	individual)									
N/A												
Business o	r Residenc	e Address	(Number a	ınd Street,	City, Stat	e, Zip Co	de)					
										•		
Name of A	Associated	Broker or	Dealer							· · · · · · · · · · · · · · · · · · ·		
States in V	Which Pers	on Listed	Has Solici	ted or Inte	nds to So	icit Purch	asers					
(Check	"All State:	s'' or chec	k individu:	el States).		•,•••••	•	•••••	• • • • • • • •	· • • • • • • • • • • • • • • • • • • •		☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[1N]	[1A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	• •	[NV]	[NH]	[[[[]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SD]	[אד]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[MI].	[WY]	[PR]
Full Name	e (Last nar	ne first, if	individual)								
AN/A		1			•							
Business o	or Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	ode)					
· 1								•				
Name of	Associated	Broker o	r Dealer						 		 	
States in	Which Per	son Listed	Has Solic	ited or In	ends to So	licit Purch	hasers					
												□ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[NI]	(IA)	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[TM]	[NE]	[VV]	[HH]	[[[[]	[MM]	[YY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[NT]	[TX]	[עד]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	ie (Last na	me first, i	f individua	Д)		_						
N/A											_	
Business	or Residen	ice Addres	s (Number	and Stree	t, City, St	ate, Zip C	ode)					
					•							
Name of	Associated	Broker o	or Dealer			· ·						
		•										
States in	Which Pe	rson Liste	d Has Soli	cited or In	itends to S	olicit Purc	hasers					
				ual States)								☐ All States
[AL]	[AK]	[AZ]	•	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]	[HI]	** ** 1
[IL]	[10]	[IA]		[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NY]		[נא]	[NM]	[NY]			[0H]	[OK]	[OR]	
[RI]	(SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[]

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	•		
	Type of Security	Aggregate Offering Price	*	Amount Already Sold
	Debt	\$		\$
	Equity	\$ <u>·</u>		\$
	□ Common □ Preferred		:	
	Convertible Securities (including warrants)	<u>50,000</u>		s 50,000
	Partnership Interests	\$		\$
	Other (Specify)	\$		S
	Total	<u>5</u> 50,000		5 50,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	1		<u>\$ 50,000</u>
	Non-accredited Investors			S
	Total (for filings under Rule 504 only)			s
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule \$04 or \$05, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	T • 6		Dollar Amount
	Type of offering	Type of Security		Sold
	Rule 505			s
	Regulation A	. ·		\$
	تم Rule 504	<i></i>		\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			•
	Transfer Agent's Fees	•••••		S
	Printing and Engraving Costs			\$
	Legal Fees		Ø	\$
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			<u>S</u>
	Total			\$ 1,000

tio **a	n 1 and total expenses furnished in response to djusted gross proceeds to the issuer."	Part C - Question 4.2. This diff	ference is t	he ••	49,000
est tes	dicate below the amount of the adjusted gross ped for each of the purposes shown. If the amount mate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth	int for any purpose is not know te. The total of the payments list	n, furnish ed must eou	an .	
•				Paymenu Officer Directors Affiliat	s, & Payments To
	Salaries and fees	*************	ঠা	\$ <u>`</u>	5 - 5 - 000
	Purchase of real estate	****************		5	
`•	Purchase, rental or leasing and installation of				
	Construction or leasing of plant buildings and		•		
,	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	value of securities involved in t	his		
	Repayment of indebtedness	**************************	🖾	S	D S
•	Working capital				
	Other (specify):			s	D S
	•		•	· · ·	m s
•	Column Totals		_		
	Total Payments Listed (column totals added)	•			\$ 49,000
	3	D. FEDERAL SIGNATURE			
Tollor	essuer has duly caused this notice to be signed by ving signature constitutes an undertaking by the of its staff, the information furnished by the i	issuer to furnish to the U.S. See	curities and	Exchange Co	ommission, upon written r
ssuc	r (Print or Type)	Signature	· · · ·		Date 1/12/05
Fas	tShip, Inc.	Kelly shen C	where;		
Nam	e of Signer (Print or Type)	Title of Signer (Print or Typ	rc)		
•		Executive Vice Preside			

-ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	TO THE PROPERTY OF THE PROPERT		·
	ty described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions y le?		0
•	See Appendix, Column 5, for state response.	•	
		,	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a sotice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) FastShip, Inc.	Signature Prope Clubas	Date 1/12/05
Name (Print or Type)	Title (Print or Type)	,
Kathryn Riepe Chambers	Executive Vice President	

Instructions

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice (Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or print signatures.

	to non-a investor	to sell ccredited s in State -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	C-Item 2) Number of Non-Accredited		(Part)	-ltem1)
AL		·		22.00013	Amount	Investors	Amount	Yes	No
AK									
AZ									
AR					·				
CA					•				
СО									
СТ									
DE		_							
DC									
FL									· ·
GA			·					-	
HI					*				
ID							·		
IL							,		
IN	-			<u> </u>					
IA					,	هذ.			
KS									
KY			*··						
LA									
ME			·						
MD	·					·			
MA			· ·						
MI			·		·				
MN									
MS									
МО					•		•		4

	Intend to non-a investors	to sell ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МТ		1							
NE									
NV			·						
ИН									
NJ									
NM			A						
NY									
NC							•		
ND									
он									
ок							· · · · · · · · · · · · · · · · · · ·		
OR									
PA		x	Convertible No \$50,000	te l	\$50,000	0	0		х
RI									
sc				·		مند			:
SD		:							
TN									
TX	<u> </u>)				
UT		ļ							
VT									
VA								ļ	
WA	<u> </u>								
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PR									

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